PHARMACISTS' BULLETIN

PHARMACARE

NOVA SCOTIA DEPARTMENT OF COMMUNITY SERVICES

September 2005 Vol. #05-09

SEPTEMBER BULLETIN

EXCEPTION CRITERIA FOR TAMIFLU®

Public Health Services, Nova Scotia Department of Health have guidelines in place to manage and treat outbreaks of influenza in long term care facilities (LTC). In accordance with these guidelines, the Pharmacare Programs will provide coverage of **Tamiflu® (Oseltamivir)** for clients who are residents of long term care facilities and who have been identified by the Medical Officer of Health (MOH) as meeting the criteria for coverage.

The following is the criteria for coverage of Tamiflu® under the Nova Scotia Pharmacare Programs:

- for ***treatment*** of long-term care (LTC) residents with clinically suspected or lab confirmed influenza A or B. A clinically suspected case is one in which the patient meets the criteria of influenza-like illness and there is confirmation of influenza A or B circulating within the facility or surrounding community.
- for ***prophylaxis*** of long term care residents where the facility has an influenza A or B outbreak.

Process for Initiating Treatment and Drug Coverage of Tamiflu®:

- When a long-term care facility has a suspected outbreak of influenza, the attending physician or the LTC facility's Medical Director is directed to contact the Medical Officer of Health or the local Public Health Office.
  (For contact information on the regional Public Health offices, please refer to their website www.gov.ns.ca/health/opmoh/contact.htm)
- When the MOH determines there is a need for antiviral medication the Public Health Staff will communicate this recommendation to the facility and will also notify the provincial Pharmacare Program staff by way of fax (Pharmacare 468-9402) to ensure payment for antiviral medication claims.
- The Pharmacare Program office will, in turn, contact the dispensing pharmacy to authorize payment of claims for Tamiflu®. A specific criteria code will be provided to the dispensing pharmacy at the time of an outbreak. This will avoid the need for individual exception status drug requests.
- After hours, the local Public Health Office may contact the local pharmacy to confirm that the criteria for Pharmacare coverage of **Tamiflu®** has been met. The Pharmacare program will then be notified on the next working day by the Public Health Office to authorize payment of individual claims.

Treatment Notes

Amantadine remains an option for the treatment or prophylaxis of influenza A, unless resistance is noted or its use is contraindicated. This agent is not effective against influenza B. The neuraminidase inhibitor (oseltamivir) is effective in the treatment of influenza A and B, reducing the duration of symptoms by approximately one day. Treatment must be instituted within 48 hours of initial symptoms to achieve maximum benefit. There is some evidence to suggest that neuraminidase inhibitors can control an outbreak of influenza, for example, in a long term care facility.

INCLUDED WITH THIS BULLETIN:

- **New Diabetic Products**, eff. Sept 15, 2005

CHANGE IN MAC

Please note that the following **categories** have been removed from the MAC List due to discontinuation of one of the brands by the manufacturer. Actual acquisition cost will be paid on these categories:

AMILORIDE 5mg Tab	02249510	Apo-Amiloride	APX
	00487805	***Midamor***	***MSD – DISCONTINUED***
BETAMETHASONE 17 VALERATE 0.1% Cr	00716626	Betaderm	TAR
	00027901	***Celestoderm-V***	***SCH – DISCONTINUED***
CHLOROQUINE PHOSPHATE 250mg Tab	***02017539***	***Aralen***	***WIN – DISCONTINUED***
	00021261	Novo-Chloroquine	NOP
DIPIVEFRIN 0.1% Oph Sol	02237868	pms-Dipivefrin	PMS
	00529117	***Propine***	***ALL – DISCONTINUED***
	02032376	ratio-Dipivefrin	RPH
TRIMETHOPRIM 200mg Tab	02243117	Apo-Trimethoprim	APX
	00677590	***Proloprim***	***GSK – DISCONTINUED***

NEW DIABETIC PRODUCTS

The following diabetic products are "New Listings to the Nova Scotia Formulary" effective ***September 15, 2005***. The benefit status of each product within the Nova Scotia Pharmacare Programs is indicated.

PIN	PRODUCT	MFR	BENEFIT STATUS
97799814	Accu-Chek AVIVA Test Strips (100)	BOM	SF*
97799815	Accu-Chek AVIVA Test Strips (50)	BOM	SF*
97799816	Accu-Chek Multiclix Lancets (204)	BOM	SF*
97799817	Accu-Chek Multiclix Lancets (102)	BOM	SF*

*MAC applied

NEW PRESCRIBING OPTOMETRIST

The following optometrist has been added to the list of optometrists authorized to prescribe medications related to eye care:

Dr. Lisa Lacey (License #50195)

Please retain for your reference.